

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
	HL		2-15-01
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	ASD		3/5/01
FORMALITY REVIEW	fa	720	05-16-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final Original	
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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